## TT COUNTY HEALTH DEPARTMENT

HTE 05-5- 11994 22152 Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department." Name: (owner) Comfort Homes Tre New Installation Septic Tank Property Location: SR# 1412 Chaisting 2:54 Repairs Nitrification Line Subdivision Forest Thails Lot # 80 Quadrant # Tax ID# Basement with Plumbing: Garage: Z Public Water Supply: ☐ Well Community Distance From Well: ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject "Marites Porp to to final approval. NOther 25% reduction System Conventional Type of system: Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons exact length Subsurface width of No. of depth of ditches 3 ft. ditches J of each ditch 80 ft. Drainage Field ditches 22 in. French Drain Required: \_\_\_\_ Linear feet Date: 7-10-05 This permit is subject to revocation if site Environmental Health Specialist plans or intended use change. Manited Specis
120' of Supply Live 2"
14' of Elevation LPP Repair TENRACE HOME 21'

WOODHART GARLE

## HARNETT ( JNTY DEPARTMENT OF PL IC HEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit #_authorization shall be valid for a period not to exceed five (5) years from This authorization will be invalid for	22/52 This
This authorization will be invalid if ownership, site plans, or intended  Confort Homes Zu C	
Name	Telephone #
Name  2.0. Box 369 - Clayford N.C. 27528  Address	
Property Location SR#	ristian Lich +
Roau	Name Light
Forest Thails 30 3	<i></i>
Forest Thail 30 3 Subdivision Lot # # Bedrooms Proposed	. 461 Lot Size
TYPE OF SYSTEM	
[ New Installation [ ] Repair [   Septic Tank [ ] Nitrifica	tion Lines
[ ] Conventional [ ] Other Marthe "25 & Roberton System	
[ ] Basement [ ] With Plumbing [ ] Without Plumbing	
Water Supply: [ ] Well [ ] Public Water Supply Minimum Well Setback:Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field Length of	lines 50 Ft.
Width of ditches ft. Depth of ditches inches	
French Drain: Linear feet required Depth of gravel	
	_
No wastewater system shall be sourced at the same	
No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to	
the conditions of the Improvement Permit and that a valid Operations Permit has been issued.	
operations re	int has been issued.
Signature of Authorized Agent for Harnett County	7-12-05
Signature of Authorized Agent for Harnett County	Date